

Company _____

Location _____

For Employers Use Only

Date of Hire _____

Rate of Pay _____

Completed & Attached
I - 9 _____

Copies of Doc. _____

W -4 _____

APPLICATION FOR EMPLOYMENT

This application will be kept on active file for a minimum of 90 days.

P.O. Box 83089
Lincoln, NE 68501
(402) 434-9350

The Company is an equal opportunity employer and believes strongly in the principles of non-discrimination; therefore, no action will be taken or withheld on the basis of race, religion, sex, national origin, age or handicap.

PLEASE READ CAREFULLY AND TYPE OR PRINT CLEARLY

FOR OFFICE USE ONLY

DATE

DATE _____ 20____

MI

NAME _____
LAST FIRST MIDDLE

FIRST

PRESENT ADDRESS _____ TELEPHONE NUMBER () _____
NUMBER STREET

LAST NAME

CITY STATE ZIP CODE

PERMANENT ADDRESS _____ TELEPHONE NUMBER () _____
NUMBER STREET

CITY STATE ZIP CODE

JOB INTEREST

CHECK PREFERENCE

- FULL-TIME
- PART-TIME
- TEMPORARY
- SEASONAL

TYPE OF POSITION DESIRED (CHECK ALL APPLICABLE)

RESTAURANT OPERATIONS

- KITCHEN
- DINING ROOM
- SUPERVISOR
- MANAGEMENT
- OTHER _____

CORPORATE OFFICE OPERATIONS

- CLERICAL/PARA-PROFESSIONAL
- PROFESSIONAL/MANAGERIAL
- BOOKKEEPING/OTHER
- OTHER _____

SPECIFIC POSITION DESIRED _____ LOCATION DESIRED _____

DATE AVAILABLE _____ HOURS AND DAYS AVAILABLE _____

ARE YOU WILLING TO WORK WEEKENDS IF YOUR POSITION REQUIRES IT? YES NO

GENERAL INFORMATION

THIS COMPANY REQUIRES ALL EMPLOYEES TO BE AT LEAST 16 YEARS OLD. THE FAIR LABOR STANDARDS ACT REQUIRES THAT EMPLOYEES BE AT LEAST 18 YEARS OLD TO WORK IN JOBS DECLARED HAZARDOUS BY THE SECRETARY OF LABOR. IN ADDITION, POSITIONS WHICH INVOLVE SERVING OR SELLING ALCOHOLIC BEVERAGES MAY REQUIRE A MINIMUM AGE BETWEEN 18 AND 21. YOUR BIRTHDATE IS REQUIRED IF YOU ARE APPLYING FOR A POSITION WHICH HAS MINIMUM AGE REQUIREMENTS.

BIRTHDATE _____
MONTH DAY YEAR

ARE YOU AUTHORIZED TO WORK IN THE UNITED STATES? YES NO

WORK PERMIT NUMBER _____ EXPIRATION DATE _____

AFTER EXAMINATION OF THE JOB DESCRIPTION GIVEN TO YOU, CAN YOU PERFORM THE SPECIFIED JOB FUNCTIONS DESCRIBED? YES NO

IF NO, WOULD YOU NEED A SPECIFIC ACCOMMODATION IF HIRED, PLEASE EXPLAIN:

HAVE YOU PREVIOUSLY BEEN EMPLOYED WITH THIS COMPANY OR ANY OF ITS AFFILIATES? YES NO

IF YES, WHEN? _____ LOCATION _____ JOB _____

WAS EMPLOYMENT UNDER DIFFERENT NAME? YES NO

IF YES, GIVE NAME _____

REASON FOR LEAVING _____

HAVE YOU PREVIOUSLY APPLIED FOR A POSITION WITH THIS COMPANY OR ANY OF ITS AFFILIATES? YES NO

IF YES, GIVE DATE(S) _____

HAVE YOU EVER BEEN CONVICTED OF A VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? YES NO

A CONVICTION RECORD IS NOT AN AUTOMATIC BAR TO EMPLOYMENT. EACH CASE WILL BE CONSIDERED WITH REGARD TO FACTORS SUCH AS AGE AT TIME OF OFFENSE, SERIOUSNESS, NATURE OF THE VIOLATION AND REHABILITATION.

IF YES, PLEASE EXPLAIN _____

DO NOT WRITE BELOW THIS LINE

EXPERIENCE (Include Part-Time and Vacation Jobs)

FORMER EMPLOYERS LIST IN ORDER, BEGINNING WITH THE MOST RECENT. CIRCLE THE NUMBER OF ANY EMPLOYERS NOT TO BE CONTACTED AS A REFERENCE.	TYPE OF BUSINESS AND YOUR JOB TITLE	YOUR PRIMARY RESPONSIBILITIES AND DUTIES	EMPLOYMENT DATES	SALARY	REASONS FOR LEAVING
<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 5px;">1</div> <hr/> COMPANY NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ PHONE _____ IMMEDIATE SUPERVISOR _____	TYPE OF BUSINESS _____ <hr/> JOB TITLE _____ <hr/> PART-TIME <input type="checkbox"/> FULL-TIME <input type="checkbox"/>		FROM _____ MO. / YR. _____ <hr/> TO _____ MO. / YR. _____	STARTING _____ <hr/> ENDING OR CURRENT EARNINGS _____	
<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 5px;">2</div> <hr/> COMPANY NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ PHONE _____ IMMEDIATE SUPERVISOR _____	TYPE OF BUSINESS _____ <hr/> JOB TITLE _____ <hr/> PART-TIME <input type="checkbox"/> FULL-TIME <input type="checkbox"/>		FROM _____ MO. / YR. _____ <hr/> TO _____ MO. / YR. _____	STARTING _____ <hr/> ENDING _____	
<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 5px;">3</div> <hr/> COMPANY NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ PHONE _____ IMMEDIATE SUPERVISOR _____	TYPE OF BUSINESS _____ <hr/> JOB TITLE _____ <hr/> PART-TIME <input type="checkbox"/> FULL-TIME <input type="checkbox"/>		FROM _____ MO. / YR. _____ <hr/> TO _____ MO. / YR. _____	STARTING _____ <hr/> ENDING _____	
<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 5px;">4</div> <hr/> COMPANY NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ PHONE _____ IMMEDIATE SUPERVISOR _____	TYPE OF BUSINESS _____ <hr/> JOB TITLE _____ <hr/> PART-TIME <input type="checkbox"/> FULL-TIME <input type="checkbox"/>		FROM _____ MO. / YR. _____ <hr/> TO _____ MO. / YR. _____	STARTING _____ <hr/> ENDING _____	
<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 5px;">5</div> <hr/> COMPANY NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ PHONE _____ IMMEDIATE SUPERVISOR _____	TYPE OF BUSINESS _____ <hr/> JOB TITLE _____ <hr/> PART-TIME <input type="checkbox"/> FULL-TIME <input type="checkbox"/>		FROM _____ MO. / YR. _____ <hr/> TO _____ MO. / YR. _____	STARTING _____ <hr/> ENDING _____	

REFERENCES

LIST INDIVIDUALS WHO ARE WELL ACQUAINTED WITH YOUR QUALIFICATIONS. DO NOT LIST RELATIVES, FORMER EMPLOYEES, OR SUPERVISORS.

NAME	TITLE	ADDRESS	TELEPHONE NUMBER
1.			
2.			
3.			
4.			

PLEASE READ CAREFULLY BEFORE SIGNING

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE, TO THE BEST OF MY KNOWLEDGE. AND I UNDERSTAND THAT ANY MISREPRESENTATION OR WILLFUL OMISSION OF FACTS IS SUFFICIENT REASON FOR REJECTION OF MY APPLICATION OR TERMINATION OF MY EMPLOYMENT.

I HEREBY AUTHORIZE THE ABOVE COMPANY TO INVESTIGATE MY STATEMENTS. ALL EMPLOYERS, EDUCATIONAL INSTITUTIONS, AND PERSONAL REFERENCES LISTED ARE HEREBY AUTHORIZED TO PROVIDE SAID COMPANY WITH ANY AND ALL REQUESTED INFORMATION REGARDING MY EMPLOYMENT OR CHARACTER. THE ABOVE COMPANY AND ITS AFFILIATES AND ALL EMPLOYERS, EDUCATIONAL INSTITUTIONS AND PERSONAL REFERENCES ARE HEREBY RELEASED FROM ANY AND ALL LIABILITY WHICH MAY OTHERWISE RESULT FROM FURNISHING SUCH INFORMATION.

I HEREBY AGREE AND AUTHORIZE VALENTINO'S TO DEDUCT FROM MY PAYCHECK(S) ANY AMOUNTS NECESSARY TO OFFSET ANY DAMAGES CAUSED BY ME OR THE VALUE OF ANY PROPERTY OR MONEY ENTRUSTED TO ME BY OR OWED BY ME TO VALENTINO'S DURING THE COURSE OF MY EMPLOYMENT WITH VALENTINO'S.

I AGREE THAT I WILL SETTLE ANY AND ALL PREVIOUSLY UNASSERTED CLAIMS, DISPUTES, OR CONTROVERSIES ARISING OUT OF OR RELATING TO MY APPLICATION FOR CANDIDACY FOR EMPLOYMENT, EMPLOYMENT, AND/OR CESSATION OF EMPLOYMENT WITH VALENTINO'S OF LINCOLN, INC., VALENTINO'S OF OMAHA, INC., OR VAL LIMITED, EXCLUSIVELY BY FINAL AND BINDING ARBITRATION BEFORE A NEUTRAL ARBITRATOR. BY WAY OF EXAMPLE ONLY, SUCH CLAIMS INCLUDE CLAIMS UNDER FEDERAL, STATE, AND LOCAL STATUTORY OR COMMON LAW, SUCH AS AGE DISCRIMINATION IN EMPLOYMENT ACT, TITLE V11 OF THE CIVIL RIGHTS ACT OF 1964, AS AMENDED, INCLUDING THE AMENDMENTS OF THE CIVIL RIGHTS ACT OF 1991, THE AMERICANS WITH DISABILITIES ACT, THE LAW OF CONTRACT AND THE LAW OF TORT.

USE OR ACCEPTANCE OF THIS APPLICATION DOES NOT INDICATE THERE ARE POSITIONS OPEN AND DOES NOT, IN ANY WAY, OBLIGATE THE ABOVE COMPANY.

DATE

APPLICANT'S SIGNATURE